STATE OF RHODE ISLAND , SC		COURT
	:	
v.	: :	C.A. No.
	:	

## ATTORNEY CERTIFICATION FOR PRO HAC VICE ADMISSION

:

1.	I certify that I am a member in good standing of the bar of the State(s) of
	, without any restriction on my eligibility to practice,
and that I und	derstand my obligation to notify this Court immediately of any change
respecting m	y status in this respect.

	2.	Wi	thin	the prece	eding	sixty	(60)	mon	ths,	I was	or	am	currently	admitt	ed
pro	hac vice	<u>e</u> , or	have	applied	to be	admi	tted	<u>pro</u>	<u>hac</u>	vice,	in	the	following	cases	or
pro	ceedings	in thi	s Stat	te:											

3. I have read, acknowledge, and agree to observe and to be bound by the local rules and orders of this Court, including the Rules of Professional Conduct of the Rhode Island Supreme Court, as the standard of conduct for all attorneys appearing before it.

- 4. I acknowledge that if specially admitted to appear in the above-entitled matter that I will be subject to the disciplinary procedures of the Rhode Island Supreme Court. I hereby authorize the disciplinary authorities of the bar of the State(s) of \_\_\_\_\_\_ to release any information concerning my practice in said State(s) pursuant to the request of the Disciplinary Counsel of the Rhode Island Supreme Court.
- 5. For purposes of this case I have associated with local associate counsel identified below, and have read, acknowledge, and will observe the requirements of this Court respecting the participation of local associate counsel, recognizing that failure to do so may result in my being disqualified, either upon the Court's motion or motion of other parties in the case.

Signature	
Name	
Firm Name	
Business Address	
CERTIFICATION OF L	OCAL ASSOCIATE COUNSEL
	in the foregoing Certification, and acknowledge of this Court as related to the participation and l.
	Signature
	Local Associate Counsel
	RI Bar ID #
	Firm Name
	Business Address